



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Nishida	Brian	C.	(808)877-3855
MAILING ADDRESS (Street)			FAX
P.O. Box 187			(808)871-0953
(City)	(State)	(Zip Code)	
Kahului	HI	96733-6687	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Maui Land & Pineapple Company, Inc.			(808)877-3351
MAILING ADDRESS (Street)			FAX
P.O. Box 187			(808)871-0953
(City)	(State)	(Zip Code)	
Kahului	HI	96733-6687	

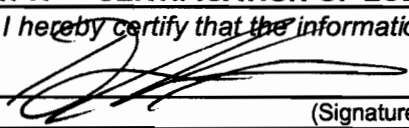
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Maui Land & Pineapple Company, Inc.		(808)877-3351
MAILING ADDRESS (Street)		FAX
P. O. Box 187		(808)871-0953
(City)	(State)	(Zip Code)
Kahului	HI	96733-6687
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Warren A. Suzuki		(808)877-3882
MAILING ADDRESS (Street)		FAX
P.O. Box 187		(808)871-4375
(City)	(State)	(Zip Code)
Kahului	HI	96733-6687

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

2/8/06
(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
David C. Cole	Chairman, President & CEO

NAME OF ORGANIZATION (if applicable)

Maui Land & Pineapple Company, Inc.

TELEPHONE

(808) 877-3351

MAILING ADDRESS (Street)

P. O. Box 187

FAX

(808) 871-0953

(City)

Kahului

(State)

HI

(Zip Code)

96733-6687

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.


(Signature of Authorizing Officer or Person Represented)

(Date)